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 Form PTO-875

**MULTIPLE IDENT CLAIM
 FEE CLAIMATION SHEET
 (FOR USE WITH FORM PTO-875)**

SERIAL NO. 02 1787644 FILING DATE _____
 APPL. _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
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TOTAL IND.	2		1			
TOTAL DEP.	9		6			
TOTAL CLAIMS	11		7			

	IND.	DEP.	IND.	DEP.	IND.	DEP.
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